

Exhibit 5



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
07/10/2012	201219100480	LIMITED LIABILITY COMPANY - AMENDMENT (LAM)	50.00	.00		.00	.00

Receipt

This is not a bill. Please do not remit payment.

JASON O'DELL
8044 MONTGOMERY RD
STE. 440
CINCINNATI, OH 45236

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted**1712826**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

OJM GROUP, LLC

and, that said business records show the filing and recording of:

Document(s)

Document No(s):

LIMITED LIABILITY COMPANY - AMENDMENT**201219100480**

United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of
the Secretary of State at Columbus,
Ohio this 5th day of July, A.D.
2012.

Ohio Secretary of State



Form 543A Prescribed by:
Ohio Secretary of State

JON HUSTED
Ohio Secretary of State

Central Ohio: (614) 466-3910
Toll Free: (877) SOS-FILE (767-3453)
www.OhioSecretaryofState.gov
Busserv@OhioSecretaryofState.gov

Mail this form to one of the following:

Regular Filing (non expedite)
P.O. Box 1329
Columbus, OH 43216

Expedite Filing (Two-business day processing
time requires an additional \$100.00).
P.O. Box 1390
Columbus, OH 43216

**Domestic Limited Liability Company Certificate of
Amendment or Restatement**
Filing Fee: \$50

2012 JUL -5 AM 9:19

(CHECK ONLY ONE (1) BOX)

(1) Domestic Limited Liability Company

☒ Amendment (129-LAM)

07-11-2007

Date of Formation

(2) Domestic Limited Liability Company

☐ Restatement (142-LRA)

Date of Formation

The undersigned authorized representative of:

O'Dell Jarvis Mandell, LLC

Name of limited liability company

1712826

Registration Number

If box (1) Amendment is checked, only complete sections that apply. If box (2) Restatement is checked, all sections below must be completed.

The name of said limited liability company shall be:

OJM Group, LLC

Name must include one of the following words or abbreviations: "limited liability company," "limited," "LLC," "L.L.C.," "Ltd.," or "Ltd"

This limited liability company shall exist for a period of:

Period of Existence

Purpose

For any lawful purpose.

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required


Articles and original appointment of agent must be signed by a member, manager or other representative.

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.


  X
Signature



Manager
By (if applicable)


Jason O'Dell
Print Name


Signature


By (if applicable)


Print Name


Signature


By (if applicable)


Print Name



Form 590 Prescribed by:

JON HUSTED
Ohio Secretary of StateCentral Ohio: (614) 466-3910
Toll Free: (877) SOS-FILE (767-3453)
www.OhioSecretaryofState.gov
Busserv@OhioSecretaryofState.gov**Consent for Use of Similar Name**(To be filed with new business formation document or amendment to
change business name where a name conflict will occur.)Name of Entity/Individual Giving Consent Charter/Registration/License Number of Entity giving Consent Gives it Consent To To Use The Name By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the
 requisite authority to execute this document.**REQUIRED**Consent form must
be signed by an authorized
representative of the
consenting entity.If authorized representative
is an individual, then they
must sign in the "signature"
box and print their name
in the "Print Name" box.If authorized representative
is a business entity, not an
individual, then please print
the business name in the
"signature" box, an
authorized representative
of the business entity
must sign in the "By" box
and print their name in the
"Print Name" box.
Signature
Manager

By (if applicable)

Jason O'Dell

Print Name

Signature
By (if applicable)
Print Name

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Last Revised: 2/6/12